EPA REGION IX SITE SCREENING CALCKLIST ABBRIEVIATED REMOVAL ASSESSMENT VERSION

This review checklist is to be used by individual site screening staff when reviewing sites which have been brought to the attention of EPA or the State. .

1.0 GENERAL INSTRUCTIONS

Complete Section 1 for the site using readily available information and contacting appropriate individuals.

1.1	Site Information				
;	Site Name:	Shellma~	Produ	ets C	2020
,	Alias Name:				
;	Site Street Address:				
(City, County, State:	South Gate	CA		
1	EPA ID Number:	CAO 983	506	190	
,	Site Screener:	W. hearis	Date:	19 M	ar ge
1	Date of Discovery:				
2.0	REMOVAL ASSESSMENT	CRITERIA — NCP EVA	LUATION		
to a	e the following criteria to determine if any question is yes, the site is eligi pible for removal assessment. If a control	ible for a removal assessment	t. If all answe	ers are no, th	he site is not
1.	Is there actual or potential exposu or the food chain from hazardous contaminants?		nals,	[] Ye	s []No
2.	Is there actual or potential contam sensitive ecosystems?	ination of drinking supplies or		[] Ye	s []No
3.	Are hazardous substances, polluta barrels, tanks, or other bulk storag threat of release?			[] Ye	s []No
4.	Are there high levels of hazardous contaminants is soils largely at or migrate and affect populations or the street of the stree	near the surface, which may		[] Ye	s []No
5.	Could weather conditions cause h or contaminants to migrate or be r		nts,	[] Ye	s []No
6.	Is there a threat of fire or explosion	n?		[] Ye	s []No
7.	Are there appropriate Federal or S respond to the release or potential			[] Ye	s []No

8.	Are there other situations of factors which may pose threats to public health, welfare, or the environment?	[]Yes	[] No
9.	< Reserved >	[]Yes	[] No
10.	For the situation where there appears to be primarily a groundwater contamination problem, is there a near-surface source which can be removed?	[]Yes	[] No
Cor	nments: RA-Not recommended		
	Eachly operational		
			
DE	CISION:		
1.0	No Removal Assessment Necessary - Section 1 Completed. Section 2 -	comments at	minimum
2.0	Refer for Removal Assessment Consideration - Follow Up - sections 1 and	2 required	
	2.1 Removal Assessment - Sections 1 and 2 required		
3.0	Removal Assessment - Sections 1 and 2 required		
os	Signature and Date:	49	